

C-3
HU.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF

Nelson L. Bruce

DEFENDANT

Equifax et al.

COURT CASE NUMBER

2:21-cv-03603-BHH-MGB

TYPE OF PROCESS

CIVIL

SERVE
AT

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

TransUnion, LLC, THE PRENTICE-HALL COPROPRATION SYSTEM, INC

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

508 Meeting Street, West Columbia, SC 29169

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Nelson L. Bruce

PO BOX 3345

Summerville, SC 29484-3345

Number of process to be
served with this Form 2852021 NOV 29 PM 12:45
RECEIVED
CLERK, CHARLESTON, SCNumber of parties to be
served in this case

3

Check for service
on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

DATE

11/1/21

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total
number of process indicated.
(Sign only for USM 285 if more
than one USM 285 is submitted)

Total Process

1

District of
Origin

No. 71

District to
Serve

No. 71

Signature of Authorized USMS Deputy or Clerk

Date

12/1/21

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

X Trey Williams - Legal Asst.

Address (complete only different than shown above)

☐ A person of suitable age and discretion
then residing in defendant's usual place
of abode

Date

12-6-2021

Time

11:20

☒ am
☐ pm

Signature of U.S. Marshal or Deputy

[Signature]

Service Fee

13 hr
\$65.00Total Mileage Charges
including endeavors)4 x .56 =
\$2.24

Forwarding Fee

Total Charges

\$67.24

Advance Deposits

Amount owed to U.S. Marshal* or
(Amount of Refund*)

\$67.24

REMARKS:

12/1/21 Fwd to USM Toller for P/S

Authorized to receive process

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

| | |
|---|--------------------------|
| PLAINTIFF Nelson L. Bruce, et al., | COURT CASE NUMBER |
| DEFENDANT Equifax Information Services, LLC ("Equifax"), et al., | TYPE OF PROCESS Civil |

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION ETC TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZ OR CONDEMN
CORPORATION SERVICE COMPANY (Registered Agent for Defendant Equifax)
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
508 Meeting Street, West Columbia, South Carolina 29169

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Nelson L. Bruce
c/o P.O. Box 3345
Summerville, South Carolina 29484

Number of process to be served with this Form 285

Number of parties to be served in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Contact information for Service on Registered Agent
1-866-403-5272
Hours of Operation M-F from 9:00 a.m. to 4:30 p.m.

Signature of Plaintiff or other Originator requesting service on behalf of

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

843-437-7901

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

| | | | | | |
|---|--------------------|-----------------------------|----------------------------|--|-----------------|
| I acknowledge receipt for the total number of process indicated (Sign only for USM 285 if more than one USM 285 is submitted) | Total Process 1 | District of Origin No 71 | District to Serve No 71 | Signature of Authorized USMS Deputy or Clerk <i>[Signature]</i> | Date 12/1/21 |
|---|--------------------|-----------------------------|----------------------------|--|-----------------|

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

X Trey Williams - Legal Asst

Address (complete only if different than shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Date
12-6-21
Time
11:20

Signature of U.S. Marshal or Deputy

| | | | | | |
|--------------------------------|---|---------------------|--------------------------|-----------------------|--|
| Service Fee 1 hr \$65.00 | Total Mileage Charges including endeavors 4 x .56 = \$2.24 | Forwarding Fee 0 | Total Charges \$67.24 | Advance Deposits 0 | Amount owed to U.S. Marshal* or (Amount of Refund*) \$67.24 \$0.00 |
|--------------------------------|---|---------------------|--------------------------|-----------------------|--|

REMARKS

12/1/21 FWD to DUSM rollover for PLS

* Authorized to receive process *

- DISTRIBUTE TO:**
- 1 CLERK OF THE COURT
 - 2 USMS RECORD
 - 3 NOTICE OF SERVICE
 - 4 BILLING STATEMENT* To be returned to the U.S. Marshal with payment, if any amount is owed Please remit promptly payable to U.S. Marshal
 - 5 ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285
Rev 11/13

RECEIVED

2021 NOV 29 PM 12:45

RECEIVED
USDC CLERK, CHARLESTON, SC

2021 DEC 15 AM 10:52

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

| | |
|-------------------------------------|---|
| PLAINTIFF <u>Nelson L. Bruce</u> | COURT CASE NUMBER 2:21-cv-03603-BHH-MGB |
| DEFENDANT <u>Equifax et al.</u> | TYPE OF PROCESS CIVIL |

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
Experian Information Solutions, Inc. C T CORPORATION SYSTEM
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
2 Office Park Court Suite 103, Columbia, SC 29223

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Nelson L. Bruce
PO BOX 3345
Summerville, SC 29484-3345

Number of process to be served with this Form 285

1

Number of parties to be served in this case

3

Check for service on U.S.A.

RECEIVED

2021 NOV 29 PM 12:55

COLUMBIA, SC

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE

11/15/2021

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated.
(Sign only for USM 285 if more than one USM 285 is submitted)

Total Process

1

District of Origin

71

District to Serve

71

Signature of Authorized USMS Deputy or Clerk

Date

12/1/21

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

Lisa Culler

Address (complete only different than shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Date

12-7-21

Time

1:35

Signature of U.S. Marshal or Deputy

RECEIVED
USDC CLERK, CHARLESTON, SC
12-10-21
AM 10:52

| | | | | | |
|--|---|----------------------------|---------------------------------|------------------------------|---|
| Service Fee <u>1 hr</u> <u>\$65.00</u> | Total Mileage Charges including endeavors) <u>21 x .56 =</u> <u>\$11.76</u> | Forwarding Fee <u>0</u> | Total Charges <u>\$76.76</u> | Advance Deposits <u>0</u> | Amount owed to U.S. Marshal* or (Amount of Refund*) <u>\$76.76</u> |
|--|---|----------------------------|---------------------------------|------------------------------|---|

REMARKS:

12/1/21 FWD to USM Culler for P/S

* Authorized to receive process *

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF

Christopher Edward Lewallen

COURT CASE NUMBER

8:21-cv-01171-SAL-MHC

DEFENDANT

Timothy McCarley, et al

TYPE OF PROCESS

Civil

SERVE
AT

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

Records Custodian/Court Reporter

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

Anderson County Courthouse at 100 S Main St., Anderson, S.C. 29625

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Christopher Edward Lewallen 318407
Anderson County Detention Center
1009 David Lee Coffee Place
Anderson, SC 29625Number of process to be
served with this Form 285Number of parties to be
served in this caseCheck for service
on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Signature of Attorney other Originator requesting service on behalf of:

☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

843-579-1401

DATE

October 26, 2021

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total
number of process indicated.
(Sign only for USM 285 if more
than one USM 285 is submitted)

Total Process

1

District of
Origin

No. 71

District to
Serve

No. 71

Signature of Authorized USMS Deputy or Clerk

[Signature]

Date

12/1/21

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

Leah Howell / Anderson Clerk of Court Office

☒ A person of suitable age and discretion
then residing in defendant's usual place
of abode

Address (complete only different than shown above)

Date

12-2-21

Time

11:45

☒ am
☐ pm

Signature of U.S. Marshal or Deputy

[Signature]

Service Fee

\$65.00

Total Mileage Charges
including endeavors

\$34.72

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal* or
(Amount of Refund*)

REMARKS:

12/1/21 FWD to GVL subsm Campbell for P/S

12-2-21 1st End; 1-DUSM x 1 hour

start mileage 61,259

GVL mileage 61,321 = 62 miles x 56 = 34.72

1. CLERK OF THE COURT

2. USMS RECORD

3. NOTICE OF SERVICE

4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment,
if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Total = \$99.72

Form USM-285
Rev. 12/80C-12
RECEIVED
CLERK-CHARLESTON
2021 DEC 15 AM 10:53RECEIVED
2021 DEC 10 4:45 PM
COLUMBIA, SC

DML

AO 88B (Rev. 02/11) Subpoena to Produce Documents, Information, or Objects or to Permit Inspection of Premises in a Civil Action (Page 2)

Civil Action No. 8:21-cv-01171-SAL-MHC

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 45.)

I received this subpoena for (name of individual and title, if any) Anderson County Courthouse Records
 on (date) 12-1-2021 Custodian / Court Reporter

☒ I served the subpoena by delivering a copy to the named person as follows: Leah Howell @
Anderson County Clerk of Court office
 on (date) 12-2-21 ; or

☐ I returned the subpoena unexecuted because: _____

Unless the subpoena was issued on behalf of the United States, or one of its officers or agents, I have also
 tendered to the witness the fees for one day's attendance, and the mileage allowed by law, in the amount of
 \$ _____

My fees are \$ 34.72 for travel and \$ 65.00 for services, for a total of \$ \$99.72
~~0.00~~

I declare under penalty of perjury that this information is true.

Date: 12-2-21

Douglas M. Leslie
 Server's signature

DUSM Douglas M. Leslie
 Printed name and title

250 E. North St., Greenville, SC 29601
 Server's address

Additional information regarding attempted service, etc.:

Print

Save As...

Add Attachment

Reset